

2014 - 2018 Capital Budget Request Form

Department Agency Number	450	Contact Name	George A. Patterson, Director of Property Management Dept.						
Department Name	Property Management	Contact Number	504-658-3600						
Date		Contact E-Mail	gapatterson@NOLA.Gov						
Request #	Department Ranking	Priority Criteria Ranking	Project Name	Project Amount	2014	2015	2016	2017	2018
1	1	153	Citywide building repairs	\$ 5,500,000.00	1,500,000.00	1,500,000.00	1,000,000.00	1,000,000.00	500,000.00
2	2	153	Mardi Gras bleachers and stands	\$ 975,000.00	975,000.00				
3	3	147	Facilities Maintenance Warehouse	\$ 3,000,000.00	2,500,000.00	500,000.00			
4	4	150	City Hall Fire Alarm & Monitoring System	\$ 945,000.00	945,000.00				
5	5	135	Replace City Hall Elevators	\$ 2,500,000.00	1,500,000.00	1,000,000.00			
6	6	141	Replacement of Civil District Court Elevators	\$ 2,200,000.00	1,200,000.00	1,000,000.00			
7	7	141	Mahalia Jackson Theater of Performing Arts	\$ 6,200,000.00	2,200,000.00	2,000,000.00	2,000,000.00		
8	8	123	Algiers Courthouse Renovations	\$ 1,200,000.00	600,000.00	600,000.00			
9	0	0	0	\$ -					
TOTAL				\$ 22,520,000.00	11420000	6600000	3000000	1000000	500000

Department Head
Signature _____

Printed Name _____

Date _____

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	Citywide building repairs	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	Citywide building repairs	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Citywide building repairs to maintain HVAC, Electrical, Plumbing, and Roofing systems at City buildings.		
Five Year Summary	Funding provided to address emergency building repairs for a five year period.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 5,500,000.00	Proposed Funding Source	Bond Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?	Emergency building repairs will be made citywide; which will improve safety.	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014 , 2015, 2016, 2017, 2018
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	450	Department Name	Property Management
Project Name	Citywide building repairs	Department Priority Ranking	2
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	3	9	
Economic Development	3	9	
Operating Budget	3	9	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	4	12	
Intensity of Use	4	12	
Scheduling	1	3	
Benefit/ Cost	3	9	
Potential for Duplication	3	9	
Availability of Financing	2	6	
Special Need	1	3	
Entergy Consumptom	3	9	
Timeliness/ External	3	9	
Public Support	4	12	
TOTAL Ranking	51	153	

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	Mardi Gras bleachers and stands	Department Priority Ranking	2
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No
Project Address	Unknown	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replace an aging (40) forty years old structurally unsafe , costly, bleacher and stand system used for Mardi Gras and special events. The Department of Property Management spends approximately \$200,000.00 each year as a result of using these old antiquated bleachers and stands		
Five Year Summary	Acquisition of new state of the art hydraulic, transportable , and cost effective bleacher/stand system. Also, realize a significant savings on labor and materials cost.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 975,000.00	Proposed Funding Source	Bond Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?	Savings of public dollars and improved safety.	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	450	Department Name	Property Management
Project Name	Mardi Gras bleachers and stands	Department Priority Ranking	2
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	3	9	
Protection of Capital Stock	3	9	
Economic Development	2	6	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	2	6	
Intensity of Use	4	12	
Scheduling	2	6	
Benefit/ Cost	4	12	
Potential for Duplication	1	3	
Availability of Financing	4	12	
Special Need	3	9	
Entergy Consumption	3	9	
Timeliness/ External	2	6	
Public Support	4	12	
TOTAL Ranking	51	153	

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	Facilities Maintenance Warehouse	Department Priority Ranking	3
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	Blank
Project Address	Location to be determined	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Storage of specialty equipment for multiple City agencies		
Five Year Summary	Acquisition of a large warehouse to storage CNO specialty equipment		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 3,000,000.00	Proposed Funding Source	Bond funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?	Storage of specialty equipment for multiple City agencies	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014, 2015
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	450	Department Name	Property Management
Project Name	Facilities Maintenance Warehouse	Department Priority Ranking	3
Categories	Rating	Score	
Public Health and Safety	2	6	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	3	9	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	4	12	
Intensity of Use	3	9	
Scheduling	2	6	
Benefit/ Cost	3	9	
Potential for Duplication	2	6	
Availability of Financing	4	12	
Special Need	2	6	
Entergy Consumption	2	6	
Timeliness/ External	2	6	
Public Support	4	12	
TOTAL Ranking	49	147	

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	City Hall Fire Alarm & Monitoring System	Department Priority Ranking	4
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No
Project Address	City Hall	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replace existing City Hall Fire Alarm and Monitoring System(s). This system should include a minimum of two fire alarm annunciation/control panels (City Hall Engine Room/1st. Floor area). The equipment should be non-proprietary and allows maintenance and repairs by multiple vendors.		
Five Year Summary	Replace current fire alarm and monitoring system at City Hall		
Has an Architect or Engineer prepared drawings for this project?	Yes	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 945,000.00	Proposed Funding Source	Bond Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	450	Department Name	Property Management
Project Name	City Hall Fire Alarm & Monitoring System	Department Priority Ranking	4
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	2	6	
Operating Budget	3	9	
Life Expectancy of Project	3	9	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	2	6	
Intensity of Use	4	12	
Scheduling	2	6	
Benefit/ Cost	4	12	
Potential for Duplication	1	3	
Availability of Financing	3	9	
Special Need	3	9	
Entergy Consumption	3	9	
Timeliness/ External	2	6	
Public Support	4	12	
TOTAL Ranking	50	150	

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	Replace City Hall Elevators	Department Priority Ranking	5
Project Type	450	Is a Land acquisition needed? (Y/N)	No
Project Address	City Hall	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replace City Hall Elevators (5) five passenger elevators and (1) one freight elevator		
Five Year Summary	Replace all elevators which will improve safety and reduce repair and maintenance cost.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 2,500,000.00	Proposed Funding Source	Bond Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?	Improve safety when using elevators and reduce repair and maintenance cost.	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014 , 2015
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	450	Department Name	Property Management
Project Name	Replace City Hall Elevators	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	3	9	
Protection of Capital Stock	3	9	
Economic Development	3	9	
Operating Budget	3	9	
Life Expectancy of Project	2	6	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	1	3	
Benefit/ Cost	4	12	
Potential for Duplication	1	3	
Availability of Financing	2	6	
Special Need	1	3	
Entergy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
TOTAL Ranking	45	135	

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	Replacement of Civil District Court Elevators	Department Priority Ranking	6
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No
Project Address	Civil District Court Building	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replacement of Civil District Court Elevators (5) five passenger elevators and convert (1) of the elevators to a freight elevator.		
Five Year Summary	Elevator equipment replaced and repair/maintenance costs minimized.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 2,200,000.00	Proposed Funding Source	Bond Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?		For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014 , 2015
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	450	Department Name	Property Management
Project Name	Replacement of Civil District Court Elevators	Department Priority Ranking	4
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	2	6	
Economic Development	3	9	
Operating Budget	2	6	
Life Expectancy of Project	3	9	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	2	6	
Benefit/ Cost	4	12	
Potential for Duplication	1	3	
Availability of Financing	2	6	
Special Need	3	9	
Entergy Consumption	2	6	
Timeliness/ External	2	6	
Public Support	4	12	
TOTAL Ranking	47	141	

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	Mahalia Jackson Theater of Performing Arts	Department Priority Ranking	7
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	143 Rampart Street	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replace air handler units (AHU) #1 thru 8. Add humidity sensors to the Siemens control system. Insulate diffusers to reduce the amount of condensation on and around ceiling. Repair ceiling damage from condensation. Repair the store front doors and glass on the front of the theater. Paint the interior of the auditorium a non-reflective color. Build a multi-story parking garage.		
Five Year Summary	Required repairs implemented that will improve building system(s) and reduce repair and maintenance cost.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 6,200,000.00	Proposed Funding Source	Bond funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?	Improved facility	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014, 2015, 2016
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	450	Department Name	Property Management
Project Name	Mahalia Jackson Theater of Performing Arts	Department Priority Ranking	4
Categories	Rating	Score	
Public Health and Safety	3	9	
External Requirements	4	12	
Protection of Capital Stock	2	6	
Economic Development	3	9	
Operating Budget	3	9	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	2	6	
Intensity of Use	4	12	
Scheduling	1	3	
Benefit/ Cost	4	12	
Potential for Duplication	1	3	
Availability of Financing	2	6	
Special Need	1	3	
Entergy Consumption	2	6	
Timeliness/ External	3	9	
Public Support	4	12	
TOTAL Ranking	47	141	

Capital Budget Request Form			
Agency Number	450	Department Name	Property Management
Project Name	Algiers Courthouse Renovations	Department Priority Ranking	8
Project Type	450	Is a Land acquisition needed? (Y/N)	No
Project Address	225 Morgan Street	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replace all wood in attic from termite damage. Replace all HVAC equipment. Upgrade electrical system, replace all wood frame and glass windows. Water proof and paint exterior of buildings.		
Five Year Summary	Complete building repairs		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,200,000.00	Proposed Funding Source	Bond Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Project adheres to Master Plan		
What Benefit(s) will be provided to Public from this project?	Improved facility and reduced maintenance and repair cost.	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014, 2015
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	450	Department Name	Property Management
Project Name	Algiers Courthouse Renovations	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	3	9	
External Requirements	4	12	
Protection of Capital Stock	3	9	
Economic Development	2	6	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	1	3	
Relation to dopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	2	6	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	2	6	
Special Need	1	3	
Entergy Consumption	2	6	
Timeliness/ External	2	6	
Public Support	4	12	
TOTAL Ranking	41	123	